Meeting Notes

Team: EPR Public Health and Medical Advisory Committee (PHMAC) Date: Thursday - 09/01/2016

Time: 10:00 am MST Place: Conference Call

Call in information:

Phone # 1-877-820-7831, or 720-279-0026

Participant Code - 845543#

Time:	Agenda Topics:		Person Leading Discussion:
10:00 am	Welcome/Roll Call		Dane Matthew
	Welcome New Members:		
	Local Health EPR - Wester	n Slope new member: Greg Rajnowski	
	Primary Care - Kaiser new	member: Ronald Quaife	
	Vacancies:		
	OERP Systems Manager		
	Hospital - Trauma Level 1		
	Long Term Care Facilities		
	Attendance:		
	OEPR Staff:	Dane Matthew, Garry DeJong, Judy Yockey,	
	Melanie Simons, Greg Stas	inos, Korey Bell, Lyle Moore, Keith Schemper	
	Local Health EPR-Metro:	Charles Smedley	
	Local Health EPR-West:	Greg Rajnowski	
	Local Health EPR-Rural:	Mike Burnett	
	Local Health EPR-Rural:	Kris Stokke	
	State Health Facilities:	Melanie Roth	
	Hospitals - CHA:	Deb French	
	EMS Metro:	James Robinson	
	EMS-RETAC:	Linda Underbrink	

	Surgical Centers: Shawna for Chris Skagen Community Health: Paula Davis Academic: Charles Little Healthcare Coalition Council: Sara Garrington Absent: Local Environmental Health; Hospital-Trauma Level 1; EMS-Pediatrics; OEM-State; OEM-Local; Long Term Care Facilities; Community Health-CRHC; Tribal Nations; Coroners; Support Services-Blood; Federal Health Facilities; Volunteer Organizations; CALPHO	
10:10 am	 Grant 5-year Work Plan - Strategic Planning Process - Update CDPHE OEPR management has contracted with Government Performance Solutions (GPS) to work on the upcoming 5 year strategic grant work plan for the HPP and PHEP Cooperative Agreement which will start on July 1, 2017. GPS will be facilitating the 1 day workshop at the 2016 Fall Regional Staff and Partners meeting on Thursday, October 27, 2016. This is something that was noted in the 205-2016 OEPR Environmental Scan from our community stakeholders. Tentative timeline for community stakeholders: September 13, 2016 identify stakeholders and release the survey; schedule focus groups September 20, 2016 compile responses and perform analysis to determine insights September 27, 2016 summarize insights by stakeholder group for OEPR team review Community stakeholder groups: LPHAs, Hospitals, Healthcare Coalition Council and local HCCs, Behavioral health/mental health facilities, Federally Qualified Clinics/Community Health Clinics, Medical Reserve Corps, Rural Clinics and Tribal Nations. 	Judy Yockey

	 OEPR managers and GPS held a meeting prior to the PHMAC call to align questions that they are going to ask community stakeholders which will be going out approximately September 13, 2016. Greg Bellomo and Kate Newberg from GPS introduced themselves on the PHMAC call and discussed working on the capabilities with OEPR and community stakeholders. 	
10:15 am	Fall Regional Staff and Partners Conference Agenda Event: "Fall 2016 Regional Staff and Partners Conference" When: October 27-28, Where: At the Inverness in Englewood. Who: Regional Staff, EPR Coordinators, Behavioral Health Partners, HCC Leads, Representatives from OEPR. Agenda: Strategic Planning Session, Full Scale Exercise Update, "State of the State" presentation, breakout sessions The "Save-the-Date" announcement has been sent out. The official announcement will be sent soon as contractual details are finalized. On October 26, the Full Scale Exercise Midterm Planning Conference will take place also at the Inverness. These events were planned together to accommodate people traveling from across the state.	Korey Bell
10:25 am	 Altered Standards of Care Workgroup Work group has been reinvigorated since a 2 year delay for CORES implementation and Ebola staffing impacts. Stakeholders will be contacted for meetings to provide input for items for inclusion into the plan. This will be followed up by a review and vetting process with this stakeholder group. Stakeholder Current List: o EMS o Hospital / Acute care – CMS, Nurses all working together 	Garry DeJong

40.20	 § ICU's, pharmacy and other specialty groups work through their facility § Work thru the hospitals to find the correct stakeholders o Allied Health groups – Long Term Care, Skilled Nursing Facilities, Assisted Living o Behavioral Health o LPHA's o Other – CMS (may be more appropriate here), CO-PAY, ACEP – Colorado Chapter, DHSEM/Emergency Management, Vulnerable / Functional access needs populations – Garry has already reached out to Stephanie Hackett for discussion. Time lines: September 21st, 2016 10-12 – CDPHE Kick Off meeting with contractor. November and December stakeholder meetings November 10th GEEERC – Garry to provide update and any action items. Follow-up with stakeholders Feb/March, will Coordinate dates with contractor. Draft documents ready by April 1, 2017 Presentation and recommendation to the GEEERC - May 2017. Here is the link to the current Altered Standards of Care document. https://www.colorado.gov/pacific/sites/default/files/OEPR4 CDPHE Alterations in Healthcare System During Pandemic V7.pdf Garry is point of contact for project. Do not hesitate to contact with any questions. 	
10:30 am	Review of PHMAC Vision/Mission/Goal "who we are and what we are" PHMAC Mission: "The PHMAC serves as an expert stakeholder group to provide CDPHE OEPR ideas and guidance on the direction of public health and medical emergency preparedness, response, and recovery efforts in Colorado."	Dane Matthew

	 Committee members encouraged to: Be the voice of those they represent Share ideas and provide direction and take an active role in helping with OEPRs strategic planning, visionary efforts, communication, and information sharing Suggestion was made to hold face-to-face meetings to encourage open discussion Many members may not understand what OEPR doesoverview of OEPR to be included on the next agenda Suggested that an ongoing/live up-to-date status report be provided so members can see what projects OEPR is working on and what the progress is of those projects 	
10:35 am	Discussion on future focus of OEPR - Increase Preparation and Response Focus o How are we doing now? o What's missing? (Incident Commanders; Response Teams) o Where do we want to be in 5, 10, 15 years Where do committee members see OEPR is at, and where should it be going in 5, 10, 15 years. - Consolidation to more regional projectsHCCs are seeing success doing this for the health and medical community. Reduce one-off projects that lack effectiveness and focus efforts on big-picture objectives - Need a clear road map on response and recover so all hospital players small-large know where they fit in and where the state is going. - Need an opportunity to continue this discussion and face-to-face will be very helpful	Dane Matthew
10:40 am	 Set date/place for "In Person" PHMAC (November 3rd?) November 3rd is too close—need a date farther out A 1-hr meeting is too short for those traveling and for a good discussion on the roles, responsibilities, and focus of OERP. A minimum of a ½ day meeting is needed after the first of the year 	Dane Matthew

	 Will identify location for the Feb 2, 2017 meeting to have a ½ to full-day meeting Agenda items, format, process for the face-to-face meeting TBD All committee members are always welcome to come to CDPHE OPER for the meetings 	
10:50 am	Future Agenda Items	All
	- Where is OEPR at in creating response strike teams/task forces and where do	
	we want to be going forward	
10:53 am	Adjourn	
	- OEPR Director made an open request to meet with committee representatives	
	Next meeting Oct 6, 2016 (10 am - 11 am)	